

EDUCATION/TRAINING: Include education/training that demonstrates your qualification(s) for which you are applying. Use the education code number, i.e.: 1, 2, 3 in completing other parts of the application. Verification may be for positions with specific education/training requirements.

CODE	DATES	NAME AND LOCATION	TYPE OF PROGRAM OR COURSE	DIPLOMA/DEGREE/CERTS/UNITS
1	From: <input type="text"/> To: <input type="text"/>	Name: <input type="text"/> City: <input type="text"/> State: <input type="text"/>	<input type="text"/>	<input type="text"/>
2	From: <input type="text"/> To: <input type="text"/>	Name: <input type="text"/> City: <input type="text"/> State: <input type="text"/>	<input type="text"/>	<input type="text"/>
PROFESSIONAL LICENSES AND CERTIFICATES (Additional Space on pg. 4)		TYPE OF LICENSE/CERTIFICATE <input type="text"/>	DATE ISSUED/ISSUED BY <input type="text"/>	LICENSE NUMBER/EXPIRATION DATE <input type="text"/>

EXPERIENCE: Include all employment experience for the past ten years. Start with the most recent and work back. Experience may be paid or unpaid, full time or part time. Use the experience code letters, i.e.: A, B, C, D on the left in completing other parts of the application.

CODE	DATES	EMPLOYER'S NAME & ADDRESS	EXPERIENCE
A	From: <input type="text"/> To: <input type="text"/> Total Yr/Mo: <input type="text"/> Hrs/Wk: <input type="text"/> Salary: <input type="text"/>	Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Company Name: <input type="text"/> Contact Name & Phone: <input type="text"/>	Official Title: <input type="text"/> Duties: <input type="text"/> Reason for Leaving: <input type="text"/>
B	From: <input type="text"/> To: <input type="text"/> Total Yr/Mo: <input type="text"/> Hrs/Wk: <input type="text"/> Salary: <input type="text"/>	Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Company Name: <input type="text"/> Contact Name & Phone: <input type="text"/>	Official Title: <input type="text"/> Duties: <input type="text"/> Reason for Leaving: <input type="text"/>
C	From: <input type="text"/> To: <input type="text"/> Total Yr/Mo: <input type="text"/> Hrs/Wk: <input type="text"/> Salary: <input type="text"/>	Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Company Name: <input type="text"/> Contact Name & Phone: <input type="text"/>	Official Title: <input type="text"/> Duties: <input type="text"/> Reason for Leaving: <input type="text"/>
D	From: <input type="text"/> To: <input type="text"/> Total Yr/Mo: <input type="text"/> Hrs/Wk: <input type="text"/> Salary: <input type="text"/>	Address: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Company Name: <input type="text"/> Contact Name & Phone: <input type="text"/>	Official Title: <input type="text"/> Duties: <input type="text"/> Reason for Leaving: <input type="text"/>

May we contact all of your employers listed? ☐ Yes ☐ No IF NO, please indicate highlighted code letter(s):

Other names for which you are known?

CONSENT TO RELEASE OF INFORMATION: I consent to the release of information for the use in determining my eligibility, qualifications, and selection consideration about my work record, job performance, character, ability and fitness by employers, schools, law enforcement agencies and the other individuals and organizations to authorized employees of the County of San Diego. I hereby release you, your organization, current or previous employers, or others from liability or damage that may result from furnishing the requested information.

CERTIFICATE OF APPLICANT: I certify that all statements and information provided in this application and any attachments are true, and I understand that any false or misleading statements or omission of material facts may forfeit my right to employment considerations by the County of San Diego.

Signature: _____

Date: / /





CONFIDENTIAL

The following information is necessary for the County of San Diego to evaluate its hiring practices and to prepare reports for the State and Federal Government as required by law. The information contained will NOT be retained with your application and will NOT be used to make a decision about your employment.

ETHNIC GROUP: Please fill-in the bubble which best identifies you.

- ☐ **BLACK** All persons having origins in any of the original Black racial groups of Africa.
- ☐ **HISPANIC** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- ☐ **ASIAN** All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- ☐ **NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER** All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- ☐ **AMERICAN INDIAN OR ALASKAN NATIVE** All persons having origins in any of the original peoples of North and South America (including Central America), and who maintain cultural affiliation or community recognition.
- ☐ **WHITE (not of Hispanic Origin)** All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

GENDER:

- ☐ **MALE**
- ☐ **FEMALE**

DATE OF BIRTH:

Month

Day





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ADDITIONAL INFORMATION

Please use the entry boxes below if there is additional information you wish to provide.

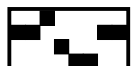
- Additional Education/Training items

Please number your responses accordingly, continued from the previous page (i.e.: 4, 5, 6...)

- Additional Work History

Please alphabetize your responses accordingly, continued from the previous page (i.e.: E, F, G...)

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BACKGROUND INVESTIGATIONS

ELECTION TO RECEIVE/NOT RECEIVE PUBLIC RECORDS:

As an applicant for employment, I am aware that the County of San Diego may obtain public records regarding me for employment or promotion purposes. I acknowledge that the term public record as used herein is limited to records of: arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment.

* Fill-in ONE circle only:

- ☐ I hereby elect to receive any public records that may be obtained by the County of San Diego for employment purposes under Civil Code 1786.53.
- ☐ I hereby elect not to receive any public records that may be obtained by the County of San Diego for employment purposes under Civil Code 1786.53.

RECRUITMENT SOURCES: How did you learn of this job? (Fill ONE bubble only)

- | | |
|---|--|
| <input type="radio"/> COUNTY EMPLOYEE | <input type="radio"/> COMMUNITY/PROFESSIONAL ORGANIZATION |
| <input type="radio"/> SCHOOL PLACEMENT | <input type="radio"/> JOB FAIR (please specify): <input type="text"/> |
| <input type="radio"/> TELEPHONE JOB LINE | <input type="radio"/> NEWSPAPER (please specify): <input type="text"/> |
| <input type="radio"/> COUNTY BULLETIN BOARD | <input type="radio"/> Sign-On San Diego |
| <input type="radio"/> TELEVISION AD | <input type="radio"/> Other Internet Site |
| <input type="radio"/> OTHER (please specify): <input type="text"/> | |
| <input type="radio"/> GovernmentJobs.com | |
| <input type="radio"/> County of San Diego Website | |
| <input type="radio"/> Community Professional Organization | |
| <input type="radio"/> Other Media Advertisements (please specify): <input type="text"/> | |

